

MCH Training Program 2006-2007 Strategic Planning Workgroups

Family Centered Care Teleconference

July 24, 2006

Meeting Notes

Introductions

- **MCH Training Resource Center:** Anita Farel, Sheryl Mathis, and Judy Gallagher were introduced as Resource Center staff. Anita Farel will be the Resource Center liaison for the Family Centered Care Workgroup. The role of the Resource Center liaison will be to facilitate workgroup calls and meetings, coordinate communication between workgroup members, and act as resource persons to identify and/or compile background materials needed by the group to move forward with specific tasks.
- **MCHB Project Officer and Workgroup Liaisons:** Laura Kavanagh, Diana Rule, Nanette Pepper, and Audrey Koertvelyessy were present. Audrey Koertvelyessy will be the MCHB liaison for the workgroup. The role of the MCHB liaison will be to provide guidance as needed on priorities and workgroup activities as well as programmatic resources and context for issues being addressed by the workgroup.
- **Workgroup Members Present:** Carole Milner, Gina Harris, Frank Franklin, Cyndi Cortes, Susan Horky, Louise Kido Iwaishi, Barbara Levitz, Karen Tate, and Penny Leggott.

Workgroup Purpose/Mandate

The Family-Centered Care work group will attempt to flesh out and operationalize 4 objectives of the National Plan directly related to family-centered care. All the objectives are under Strategic Plan Goal 2, Workforce Diversity.

Facilitators reviewed the purpose of the workgroup as stated in the *Priority MCH Training Workgroups 2006-2007* document. It was suggested that the term “family-centered be broadened to “consumer and community focused ” to make the term more applicable to training programs with a population focus (e.g. SPH) as well as programs with a clinical orientation. (Another suggested revision to the wording of the Workgroup Purpose received after the call is as follows: *Identify, assess, promote and integrate knowledge of family-centered concepts, principles, experiences and practices in the organization and implementation of the training programs.* (Barbara Levitz))

Desired Outcomes for the Workgroup and Priority Activities

The discussion centered mainly on Goal 2, Objective 3 and Objective 4. Workgroup members were in agreement about the need to compile existing curricula and potentially develop a

resource database for family/consumer-centered training. Need for a uniform baseline for instruction in family/consumer-centered training and for identifying additional funding sources to support program work related to consumer and family centered care were mentioned.

In discussing priority activities, participants focused on the following areas:

- Developing a general core curricula that could be tailored by individual programs
- Developing useful indicators for family-centered care, including indicators useful for programs that do not conduct clinical training.
- Coming to agreement on an operational definition of family centered care and including broadening the definition of “family” to include variations such as foster families and consumers. Children in foster care don’t usually have a medical home which is the primary vehicle for delivery of family-centered care.
- Identifying funding sources and models to enhance involvement of families in training (Goal 2, Objective 7).
- Identifying guidance for involving families in training and strategies for recruiting diverse families.

The 2 key priorities agreed upon by the group were:

- Identifying timely, accessible materials related to family centered care training and curricula.
- Developing indicators of “comprehensive” instruction in family centered care.

Family Centered Care Resources

As part of the discussion on the need to identify and compile materials related to family centered care that can be used by the training programs, participants identified the following resources they are aware of or currently use:

- Components of existing curricula from Hawaii (Iwaishi L, Taba S, Howard-Jones A, Brockman D, Yamashita L, Ambrose A. Training on Family Centered Interprofessional Collaboration. Health and Education Collaboration Project, Hawaii Medical Association, 1998). (UFL PPC - Susan Horky)
- PPC-developed resources: 1) Cross-cultural case studies: www.ppc.mchtraining.net). 2) The PPCs have a good model for advisory boards and are in the process of developing a guidebook on Family Mentoring. (UFL PPC - Susan Horky)
- AUCD has a useful network for developing curricula. AUCD’s Council on Community Advocacy is collaborating with the Oregon Institute on Disability & Development to develop an educational model and toolkit focused on promoting full participation of people with developmental disabilities and their family members in the planning, implementation and evaluation of university-based research. The Council is also assisting with a [technical assistance project](#) on consumer advisory committees which will include

identifying 3-4 innovative practices in consumer advisory committees and development of case studies of the programs implementing them.

http://www.aucd.org/councils/consumer_affairs/coca_activities.htm (UFL PPC - Susan Horky)

- AUCD also has a family mentoring handbook. (AL LEND -Gina Harris)
- ACCH film developed in the 1980s that can be used in FCC training - although the format may be considered dated, it is a very effective tool and the information is still very useful (UFL PPC - Susan Horky)
- Family stories, including three videos developed by Community Pediatricians. (Hawaii LEND -Louise Kido Iwaishi)
- Materials from Family Voices (AL LEND -Gina Harris)
- University of Kansas definition of family, core curriculum and other products. (AL LEND -Gina Harris)
- A definition of family centered care developed by the Beach Center on Families and Disability at the University of Kansas. In 1997 the Beach Center put together an excellent newsletter on Family-Centered Service Delivery. The current newsletter focuses on their extensive research on Family Quality of Life and has access to resources on Parent/Professional Partnerships and Parent to Parent. The website is www.BeachCenter.org (NY LEND -Barbara Levitz)

Drafting a Workplan

HSR will develop a draft workplan based on the priority activities identified by the workgroup members during the conference call discussion and input provided by members who were not able to make the call.

Next Steps

- Notes from today's conference and the draft plan will be circulated to the group for review and comment.
- The next workgroup call will take place on Wednesday August 16 at 1pm Eastern time.
- The agenda for the next call is to obtain feedback and finalize the draft work plan, and to discuss timeline and persons responsible for taking the lead on specific tasks.